SPENCER MUNICIPAL HOSPITAL AND ABBEN CANCER CENTER, LLC FINANCIAL STATEMENTS, SUPPLEMENTAL INFORMATION, AND INDEPENDENT AUDITORS' REPORTS FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

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### SPENCER MUNICIPAL HOSPITAL BOARD OF TRUSTEES AND OFFICIALS JUNE 30, 2012

BOARD OF TRUSTEES	<u>TITLE</u>	TERM EXPIRES
John Rahn John Cotton Neal Conover Gary VanHofwegen, DDS Kris Van Berkum	Chairman Vice Chairman Secretary/Treasurer Trustee Trustee	December 31, 2015 December 31, 2015 December 31, 2013 December 31, 2013 December 31, 2015

### **HOSPITAL OFFICIALS**

William Bumgarner
Stephen Deutsch
Mark Gaworski
Brenda Tiefenthaler
Susan Zulk

President and Chief Executive Officer
Vice President of Operations
Vice President of Finance and Chief Financial Officer
Vice President of Patient Care Services and Informatics
Vice President of Marketing and Fund Development

## WINTHER, STAVE & Co., LLP Certified Public Accountants

1316 West 18th Street P.O. Box 175 Spencer, Iowa 51301-0175 Phone 712-262-3117 FAX 712-262-3159 1004 21st Street #4 P.O. Box 187 Milford, Iowa 51351-0187 Phone 712-338-2488 FAX 712-338-2510

### INDEPENDENT AUDITORS' REPORT

To the Board of Trustees of Spencer Municipal Hospital and Board of Managers of Abben Cancer Center, LLC Spencer, IA 51301

We have audited the accompanying balance sheets of Spencer Municipal Hospital (Hospital), an enterprise fund of the City of Spencer, Iowa, as of June 30, 2012 and 2011, and the related statements of revenues, expenses, and changes in net assets and cash flows for the years then ended. We have also audited the balance sheets of Abben Cancer Center, LLC, (Abben), a discretely presented component unit, as of June 30, 2012 and 2011, and the related statements of income and member's equity and cash flows for the years then ended. These financial statements are the responsibility of the Hospital and Abben's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and we also audited the Hospital in accordance with the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Spencer Municipal Hospital and Abben Cancer Center, LLC, a discretely presented component unit, as of June 30, 2012 and 2011, and the results of their operations and their cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated October 3, 2012 on our consideration of Spencer Municipal Hospital's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audits.

Accounting principles generally accepted in the United States of America require that the Management's Discussion and Analysis on pages 4 through 9 and budgetary comparison schedule on page 34 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements is required by the Governmental Accounting Standards Board who considers it to be an essential part of the financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audits of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Our audits were performed for the purpose of forming an opinion on the financial statements that collectively comprise the Hospital's basic financial statements. The supplemental information included in Schedules 1 through 6 is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in our audits of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplementary information is fairly stated in all material respects in relation to the basic financial statements taken as a whole. The other information included in Schedule 7, which is marked "unaudited", has not been subjected to the auditing procedures applied in the audit of the basic financial statements and, accordingly, we do not express an opinion or provide any assurance on it.

Winther, Stave & Co., LLP

October 3, 2012

#### Introduction

Spencer Municipal Hospital (the Hospital) offers readers of our financial statements this narrative overview and analysis of the financial activities of the Hospital for the fiscal year ended June 30, 2012 and 2011. We encourage readers to consider the information presented here in conjunction with the Hospital's financial statements, including the notes thereto.

### **Overview of the Financial Statements**

This discussion and analysis is intended to serve as an introduction to the Hospital's audited financial statements. The financial statements are composed of the balance sheet, statement of revenues, expenses, and changes in net assets, and the statement of cash flows. The financial statements also include notes to the financial statements that explain in more detail some of the information in the financial statements. The financial statements are designed to provide readers with a broad overview of the Hospital's financial position. In addition, the basic financial statements of Abben Cancer Center, LLC, a component unit, are separately presented.

### **Required Financial Statements**

The Hospital's financial statements report information of the Hospital using accounting methods similar to those used by private sector healthcare organizations. These statements offer short-and long-term information about its activities. The balance sheet includes all of the Hospital's assets and liabilities and provides information about the nature and amounts of investments in resources (assets) and the obligations to Hospital creditors (liabilities). The balance sheet also provides the basis for evaluating the capital structure of the Hospital and assessing the liquidity and financial flexibility of the Hospital.

All of the current year's revenues and expenses are accounted for in the statement of revenues, expenses, and changes in net assets. This statement measures the success of the Hospital's operations over the past two years and can be used to determine whether the Hospital has successfully recovered all of its costs through its patient service revenue and other revenue sources. The Hospital does not receive any funding or property tax revenues from the City of Spencer. Revenues and expenses are reported on an accrual basis, which means the related cash could be received or paid in a subsequent period.

The final required statement is the statement of cash flows. This statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and capital and related financing activities. It also provides answers to such questions as where did cash come from, what was cash used for, and what was the change in cash balance during the reporting period.

### **Financial Highlights for 2012**

- Total assets increased by \$4,950,046 to \$100,059,269.
- Net assets increased by \$6,612,131.
- Total noncurrent cash and investments increased by \$518,440.
- Total liabilities decreased by \$1,662,085.
- The operating margin for fiscal year 2012 was 10.08%.

### Financial Highlights for 2011

- Total assets increased by \$3,707,880 to \$95,109,223.
- Net assets increased by \$6,285,582.
- Total noncurrent cash and investments increased by \$451,041.
- Total liabilities decreased by \$2,577,702.
- The operating margin for fiscal year 2011 was 7.37%.

### Financial Analysis of the Hospital

The balance sheet and the statement of revenues, expenses, and changes in net assets report the net assets of the Hospital and the changes in them. The Hospital's net assets - the difference between assets and liabilities - is a way to measure financial health or financial position. Over time, sustained increases or decreases in the Hospital's net assets are one indicator of whether its financial health is improving or deteriorating. However, other non-financial factors such as changes in economic condition, population growth and new or changed governmental legislation should also be considered.

### Assets, Liabilities, and Net Assets

A summary of the Hospital's balance sheets at June 30, 2012, 2011, and 2010 are presented in Table 1 below:

### Table 1 (in thousands)

Condensed Balance Sheets	<u>2012</u>	<u>2011</u>	<u>2010</u>
Current and other assets Capital assets	\$ 53,910 46,149	\$ 47,117 <u>47,992</u>	\$ 40,499 
TOTAL ASSETS	<u>\$100,059</u>	<u>\$ 95,109</u>	<u>\$ 91,401</u>
Current liabilities Long-term debt outstanding	\$ 7,980 <u>8,614</u>	\$ 8,040 	\$ 8,778 12,056
TOTAL LIABILITIES	<u>\$ 16,594</u>	<u>\$ 18,256</u>	\$ 20,834
Invested in capital assets - net of related debt Restricted Unrestricted	\$ 36,002 1,938 45,525	\$ 36,017 1,624 <u>39,212</u>	\$ 37,179 1,375 32,013
TOTAL NET ASSETS	<u>\$ 83,465</u>	<u>\$ 76,853</u>	<u>\$ 70,567</u>

Net assets increased by \$6,612,131 to \$83,464,656 in fiscal year 2012. Net assets increased by \$6,285,582 to \$76,852,525 in fiscal year 2011. The change in net assets results primarily from operating income.

### Revenues, Expenses, and Changes in Net Assets

The following table presents a summary of the Hospital's historical revenues, expenses, and changes in net assets for each of the fiscal years ended June 30, 2012, 2011, and 2010.

### Table 2 (in thousands)

Condensed Statements of Revenues, Expenses, and Changes in Net Assets

	Year Ended June 30,			
	<u>2012</u>	<u>2011</u>	<u>2010</u>	
Operating revenues	\$67,720	\$65,089	\$67,111	
Operating expenses	60,891	60,294	<u>61,322</u>	
Operating income	6,829	4,795	5,789	
Nonoperating income (expense)	(265)	<u>1,453</u>	<u>(79)</u>	
Excess of revenues over expenses				
before contributions	6,564	6,248	5,710	
Contributions	48	38	<u>481</u>	
Change in net assets	6,612	6,286	6,191	
Total net assets - beginning of year	<u>76,853</u>	<u>70,567</u>	64,376	
TOTAL NET ASSETS - END OF YEAR	<u>\$83,465</u>	<u>\$76,853</u>	<u>\$70,567</u>	

### **Operating and Financial Performance**

The following discusses the Hospital's operations and statements of revenue, expenses, and changes in net assets as of June 30, 2012, 2011, and 2010.

### Volume - Volume statistics are as follows:

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Inpatient dischargesInpatient days	3,159 12,729	3,376 13.385	3,573 14,595
Outpatient visits	120,682	121,793	121,625

Net Patient Service Revenue - Our net patient service revenues increased \$2,267,199 in 2012 and increased \$519,901 in 2011. These changes are the result of the following changes in gross revenues and contractual and bad debt adjustments. Contractual adjustments are the estimated amounts the Hospital will not collect from Medicare, Medicaid, and insurance companies.

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Total patient service revenues  Contractual and bad debt adjustments		\$133,293,147 (71,857,812)	\$128,053,570 (67,138,136)
Adjustments as percent of revenues	<u>54.3%</u>	<u>53.9%</u>	<u>52.4%</u>

The following table presents the relative percentages of gross charges billed for patient services by payor for the years ended June 30, 2012, 2011, and 2010.

Table 3

Pavor Mix by Percentage

	Ye	Year Ended June 30,		
	2012	<u>2011</u>	<u>2010</u>	
Medicare	48.58%	49.14%	50.00%	
Wellmark/Blue Cross/Blue Shield	25.96	25.94	25.19	
Managed Care/Commercial	9.86	9.87	10.21	
Medicaid	8.11	8.07	7.39	
All other	7.49	6.98	7.21	
TOTAL	<u>100.00%</u>	<u>100.00%</u>	<u>100.00%</u>	

<u>Salaries</u> - Salaries increased by \$611,895 in 2012 and \$481,389 in 2011. For the fiscal year ended June 30, 2012, the Hospital employed a total of 457 full-time equivalent employees, compared to 457 in 2011 and 458 in 2010. The Hospital is in a competitive wage market and annually utilizes numerous surveys to ensure a competitive compensation package is offered to employees.

<u>Employee Benefits</u> - Benefits decreased by \$433,760 in 2012 and decreased by \$165,868 in 2011. The Hospital offers a comprehensive benefit package to its employees. Benefits include but are not limited to health insurance, short and long-term disability, IPERS, and life insurance.

<u>Cash Flows</u> - The Hospital's cash flows are consistent with the changes in operating income and financial performance, as discussed earlier.

### **Capital Assets**

At June 30, 2012, the Hospital had \$103,996,042 invested in capital assets as shown in Table 4. During the year, the Hospital had approximately \$4,000,000 in capital additions. Some of the major purchases for the fiscal year include the purchase of a medical office building, purchase of property to be used for a future parking lot, remodel of the diagnostic imaging department waiting area, hospital wide replacement of IV pumps with smart pump technology, various operating room instrumentation, portable x-ray equipment and software for mandated electronic health records.

At June 30, 2011, the Hospital had \$100,239,120 invested in capital assets as shown in Table 4. During the year, the Hospital had approximately \$2,900,000 in capital additions. Some of the major purchases for the fiscal year include the remodel of the medical oncology department, software for mandated electronic health records, and remodeling of the medical office building.

The following table summarizes the Hospital's capital assets as of June 30, 2012, 2011, and 2010.

### Table 4

Capital Assets (in thousands)			
,	<u>2012</u>	<u>2011</u>	<u>2010</u>
Land	\$ 2,430	\$ 2,011	\$ 2,011
Land improvements	1,541	1,537	1,533
Buildings	48,050	47,523	46,418
Fixed equipment	8,611	8,552	8,459
Major movable equipment	42,904	40,462	37,635
Construction in progress	460	154	1,373
Subtotal	103,996	100,239	97,429
Less accumulated depreciation	<u>57,847</u>	52,247	46,527
CAPITAL ASSETS - NET	<u>\$ 46,149</u>	<u>\$ 47,992</u>	<u>\$ 50,902</u>

### **Long-Term Debt**

The Hospital had long-term debt balances of \$10,216,325 and \$12,056,078 as of June 30, 2012 and 2011, respectively. Further details are provided in the financial statement notes.

### **Performance Compared to Budget**

The following table compares fiscal year 2012 actual to budget information for the statement of revenues, expenses, and changes in net assets.

<u>Table 5</u>
Budget vs. Actual (in thousands)

	FY 2012 Budget	FY 2012 <u>Actual</u>	Dollar Variance Favorable (Unfavorable)
Operating revenues Operating expenditures Operating income Other nonoperating changes in net assets	\$68,454 64,367 4,087 513	\$67,720 60,891 6,829 (217)	\$ (734) <u>3,476</u> 2,742 (730)
Excess of revenues over expenses	<u>\$ 4,600</u>	<u>\$ 6,612</u>	\$ 2,012

### **Economic and Other Factors and Next Year's Budget**

The Hospital's Board and management considered many factors when setting fiscal year budgets. Of primary importance in setting the 2013 budget is the status of the economy, which takes into account market forces and environmental factors such as:

- Medicare, Medicaid and Wellmark/Blue Cross Blue Shield reimbursement rates
- Privacy legislation (HIPAA)
- Increased expectations for quality at a lower price
- Workforce shortages
- Cost of supplies and equipment
- Cost of construction projects
- Increasing drug costs
- Increasing number of uninsured patients
- Increasing insurance deductibles
- Investment market

### **Community Contribution**

During fiscal years 2012 and 2011, the Hospital contributed much to the community. Charity care and uncompensated care totaled \$3,248,280 and \$3,120,434, respectively.

The Hospital provides many services that are operated at a loss for the benefit of the communities it serves. Many of these programs are offered at no cost; a few are offered for a minimal service fee. Services offered for the benefit of these communities include: emergency services coverage at community events, wellness screenings, job shadowing/internships, various health education classes, public safety awareness programs, support groups, and providing the use of facilities to community groups.

In addition, many routine services are provided by the Hospital at a loss. These include: Ambulance Services, Cardiac/Pulmonary Rehabilitation, Agrisafe - Certified Farm Safety, Home Health and Public Health Programs, Inpatient Mental Health, Best Care for Better Babies, Women's Health, Rehabilitation Services (Physical and Occupational), Family Practice Clinics in Milford and Sioux Rapids, and Diabetic Education.

### **Contacting the Hospital's Finance Department**

The Hospital's financial statements are designed to present users with a general overview of the Hospital's finances and to demonstrate the Hospital's accountability. The Hospital's component unit, Abben Cancer Center, LLC, has prepared separate financial statements. If you have questions about the report, the Hospital's report, or need additional financial information, please contact the finance department at Spencer Municipal Hospital, 1200 First Avenue East, Spencer, Iowa 51301.

### SPENCER MUNICIPAL HOSPITAL BALANCE SHEETS JUNE 30, 2012 AND 2011

### **ASSETS**

OUDDENT ACCETO	<u>2012</u>	<u>2011</u>
CURRENT ASSETS: Cash and cash equivalents (Note 2)	\$ 26,784,059	\$ 21,328,567
Patient receivables - net of allowance for doubtful accounts and contractual adjustments of \$11,329,200 and \$9,726,700,		
respectively (Note 4)	7,412,690	7,258,053
Other receivables (Note 10)	1,561,933	1,194,951
Investments (Note 2)	6,888,058	6,958,453
Inventories	2,852,509	2,554,632
Prepaid expenses	795,126	718,366
TOTAL CURRENT ASSETS	46,294,375	40,013,022
NONCURRENT CASH AND INVESTMENTS (Note 2):	. =00 000	4 500 540
Internally designated for capital improvements	4,790,820	4,586,749
Principal of permanent endowments	1,738,309	1,426,179
Restricted by donors for operations	199,535	197,296
TOTAL NONCURRENT CASH AND INVESTMENTS	6,728,664	6,210,224
CAPITAL ASSETS (Notes 5, 11, and 12):		
Land	2,430,601	2,011,733
Construction in progress	459,756	153,843
Depreciable property, plant, and equipment	101,105,685	98,073,544
TOTAL CAPITAL ASSETS	103,996,042	100,239,120
Less accumulated depreciation	57,847,225	52,247,136
CAPITAL ASSETS - NET	46,148,817	47,991,984
OTHER ASSETS:		
Investment in Abben (Notes 10 and 11)	797,237	795,840
Investment in home medical equipment co. (Note 1)	21,180	16,694
Deferred finance costs - net of accumulated amortization of		
\$82,033 and \$69,570, respectively	68,996	<u>81,459</u>
TOTAL OTHER ASSETS	<u>887,413</u>	<u>893,993</u>
TOTAL ASSETS	\$100,059,269	\$ 95,109,223

### SPENCER MUNICIPAL HOSPITAL **BALANCE SHEETS - Continued** JUNE 30, 2012 AND 2011

### LIABILITIES AND NET ASSETS

		<u>2012</u>		<u>2011</u>
CURRENT LIABILITIES: Current portion of long-term debt (Note 6)	\$	1,602,119	\$	1,839,763
Accounts payable: Trade Construction and equipment Accrued salaries and wages Payroll taxes payable Estimated third-party payor settlements (Note 3)	Ť	1,505,273 138,000 2,881,673 169,942 811,496	Ť	1,397,753 95,000 3,013,224 215,002 592,680
Other current liabilities (Note 9)		871,904		886,961
TOTAL CURRENT LIABILITIES		7,980,407		8,040,383
LONG-TERM DEBT - NET OF CURRENT PORTION (Note 6)		8,614,206		10,216,315
TOTAL LIABILITIES		16,594,613		18,256,698
NET ASSETS: Invested in capital assets, net of related debt Restricted by donor - nonexpendable Restricted by donor - expendable Unrestricted TOTAL NET ASSETS		36,001,488 1,738,309 199,535 45,525,324 83,464,656		36,017,365 1,426,179 197,296 39,211,685 76,852,525
TOTAL LIABILITIES AND NET ASSETS	<u>\$1</u>	00,059,269	\$	95,109,223

### SPENCER MUNICIPAL HOSPITAL STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	<u>2012</u>	<u>2011</u>
OPERATING REVENUES:	\$ 63,702,534	\$ 61,435,335
Net patient service revenue (Note 3)	1,351,397	917,400
——————————————————————————————————————	530,378	544,050
Clinic revenue Other operating revenues	2,135,814	2,191,991
TOTAL OPERATING REVENUES	67,720,123	65,088,776
TOTAL OPERATING REVENUES	07,720,123	00,000,110
OPERATING EXPENSES:		
Salaries	21,613,020	21,001,125
Employee benefits	7,754,936	8,188,696
Professional services	5,374,896	5,429,837
Prescription drugs	4,859,122	5,050,961
Supplies and other	14,613,217	13,921,633
Clinic expenses	848,309	922,290
Depreciation	5,827,343	5,779,721
TOTAL OPERATING EXPENSES	60,890,843	60,294,263
OPERATING INCOME	6,829,280	4,794,513
NONOPERATING INCOME (EXPENSES):		
Interest income	206,463	187,080
Investment income - net of related expenses	84,277	1,903,363
Interest expense	(531,506)	(610,334)
Impairment losses	(16,000)	(4,456)
Loss on sale of capital assets	(6,924)	(21,974)
Scholarships granted	(1,000)	(650)
NET NONOPERATING INCOME (EXPENSES)	(264,690)	1,453,029
,		
EXCESS OF REVENUES AND INCOME OVER EXPENSES	6,564,590	6,247,542
CAPITAL CONTRIBUTIONS	<u>47,541</u>	38,040
CHANGE IN NET ASSETS	6,612,131	6,285,582
NET ASSETS - BEGINNING OF YEAR	<u>76,852,525</u>	70,566,943
NET ASSETS - END OF YEAR	<u>\$ 83,464,656</u>	\$ 76,852,52 <u>5</u>

### SPENCER MUNICIPAL HOSPITAL STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	<u>2012</u>	<u>2011</u>
CASH FLOWS FROM OPERATING ACTIVITIES: Cash received from patients and third party payors Cash paid to suppliers for goods and services Cash paid to employees for services Other operating revenues Other amounts paid NET CASH PROVIDED BY OPERATING ACTIVITIES	\$ 64,297,091 (25,970,991) (29,544,567) 1,764,346 (1,000) 10,544,879	\$ 61,791,302 (26,309,729) (29,070,084) 2,206,139 (650) 8,616,978
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:		
Purchases of capital assets Proceeds from sale of capital assets Principal payments on long-term debt Interest paid on long-term debt Capital grants and contributions received NET CASH USED BY CAPITAL AND RELATED FINANCING ACTIVITIES	(3,969,305) 5,205 (1,839,753) (525,770) 47,541 (6,282,082)	(2,915,838) 5,000 (1,761,215) (604,308) 38,040 (5,238,321)
CASH FLOWS FROM INVESTING ACTIVITIES: Purchase of investments Proceeds from sale and maturities of investments Income on investments Distributions received from Abben Increase in other assets Investment in home medical equipment co. NET CASH PROVIDED BY INVESTING ACTIVITIES	(3,614,218) 3,219,494 346,859 1,350,000 (15,191) 1,286,944	(3,324,156) 3,466,707 265,636 850,000 (106,220) 1,151,967
NET INCREASE IN CASH AND CASH EQUIVALENTS	5,549,741	4,530,624
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	26,453,427	21,922,803
CASH AND CASH EQUIVALENTS AT END OF YEAR	\$ 32,003,168	\$ 26,453,427
RECONCILIATION OF CASH AND CASH EQUIVALENTS TO THE BALANCE SHEETS: Cash and cash equivalents per balance sheets (Note 2): Current assets Included in noncurrent cash and investments	\$ 26,784,059 5,219,109	\$ 21,328,567 5,124,860
TOTAL CASH AND CASH EQUIVALENTS	<u>\$ 32,003,168</u>	<u>\$ 26,453,427</u>

### SPENCER MUNICIPAL HOSPITAL STATEMENTS OF CASH FLOWS - Continued FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

DECONOU LATION OF ODEDATING INCOME TO NET CASH	<u>2012</u>	<u>2011</u>
RECONCILIATION OF OPERATING INCOME TO NET CASH PROVIDED BY OPERATING ACTIVITIES:		
Operating income	\$ 6,829,280	\$ 4,794,513
Adjustments to reconcile operating income to net cash provided by operating activities:		
Depreciation	5,827,343	5,779,721
Equity in earnings of Abben	(1,351,397)	(917,400) 65,177
Equity in earnings (losses) of home medical equipment co.  Components of non-operating and operating expenses	(4,486)	65,177
reclassified for purposes of reporting cash flows:		
Scholarships awarded(Increase) decrease in:	(1,000)	(650)
Patient receivables	(154,637)	23,863
Other receivables	(366,982)	(51,029)
Inventories Prepaid expenses	(297,877) (76,760)	(316,455) (71,931)
Increase (decrease) in:	(10,100)	(71,001)
Accounts payable	107,520	(501,032)
Accrued salaries and wages Payroll taxes payable	(131,551) (45,060)	(28,574) 148,311
Estimated third-party payor settlements	218,816	(211,946)
Other current liabilities	(8,330)	(95,590)
NET CASH PROVIDED BY OPERATING ACTIVITIES	<u>\$10,544,879</u>	<u>\$ 8,616,978</u>
SUPPLEMENTAL DISCLOSURE OF NONCASH CAPITAL, FINANCING, AND INVESTING ACTIVITIES:		
Capital asset purchases  Decrease (increase) in construction accounts payable	\$ 4,012,305 (43,000)	\$ 2,900,838 15,000
Deorease (morease) in construction accounts payable	(40,000)	10,000
Cash paid to purchase capital assets	<u>\$ 3,969,305</u>	<u>\$ 2,915,838</u>

In 2010, the Hospital accrued in accounts payable \$106,220 for its investment in home medical equipment company, which was paid in 2011.

# ABBEN CANCER CENTER, LLC (A Component Unit of Spencer Municipal Hospital) BALANCE SHEETS JUNE 30, 2012 AND 2011

### **ASSETS**

CURRENT ACCETO.		<u>2012</u>	<u>2011</u>
CURRENT ASSETS: Cash (Note 2) Patient receivables - net of allowance for doubtful accounts and contractual adjustments of \$416,300 and \$571,400,	\$	363,290	\$ 329,372
respectively		198,233	232,096
Prepaid expenses		<u>152,836</u>	 <u>153,166</u>
TOTAL ASSETS	<u>\$</u>	714,359	\$ 714,634
LIABILITIES AND MEMBER'S EQUITY			
CURRENT LIABILITIES: Accounts payable	\$	39,791 133,797 173,588	\$ 39,642 135,618 175,260
MEMBER'S EQUITY		540,771	 539,374
TOTAL LIABILITIES AND MEMBER'S EQUITY	<u>\$</u>	714,359	\$ <u>714,634</u>

# ABBEN CANCER CENTER, LLC (A Component Unit of Spencer Municipal Hospital) STATEMENTS OF INCOME AND MEMBER'S EQUITY FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	<u>2012</u>	<u>2011</u>
NET PATIENT SERVICE REVENUE	\$3,644,374	\$3,085,099
OPERATING EXPENSES: Professional medical services Medical supplies Facility expenses General and administrative TOTAL OPERATING EXPENSES	1,317,081 9,330 857,089 123,019 2,306,519	1,220,356 7,822 846,906 101,782 2,176,866
OPERATING INCOME	<u>1,337,855</u>	908,233
NONOPERATING INCOME: Interest income Contributions and other income TOTAL NONOPERATING INCOME	966 12,576 13,542	1,536 7,631 9,167
NET INCOME	1,351,397	917,400
MEMBER'S EQUITY - BEGINNING OF YEAR	539,374	471,974
DISTRIBUTIONS	(1,350,000)	(850,000)
MEMBER'S EQUITY - END OF YEAR	<u>\$ 540,771</u>	<u>\$ 539,374</u>

# ABBEN CANCER CENTER, LLC (A Component Unit of Spencer Municipal Hospital) STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	<u>2012</u>	<u>2011</u>
CASH FLOWS FROM OPERATING ACTIVITIES:  Net income	\$1,351,397	\$ 917,400
Adjustments to reconcile net income to net cash provided by operating activities:  (Increase) decrease in:		
Patient receivables	33,863	61,529
Other current assets	330	(350)
Increase (decrease): Accounts payable	149	(17,410)
Accounts payable to Spencer Municipal Hospital	(1,821)	(68,153)
NET CASH PROVIDED BY OPERATING ACTIVITIES	1,383,918	893,016
CASH FLOWS FROM FINANCING ACTIVITIES:		
Distributions paid	(1,350,000)	(850,000)
NET CASH USED BY FINANCING ACTIVITIES	(1,350,000)	(850,000)
NET INCREASE IN CASH	33,918	43,016
CASH AT BEGINNING OF YEAR	329,372	286,356
CASH AT END OF YEAR	<u>\$ 363,290</u>	<u>\$ 329,372</u>

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### Nature of Business

Spencer Municipal Hospital (the Hospital) is a city public hospital organized under Chapter 392.6 of the Code of Iowa and is an enterprise fund of the City of Spencer, Iowa. The Hospital is governed by a five-member board of trustees elected by the residents of Spencer for terms of four years. The Hospital provides primary and secondary health care services through the operation of an acute care hospital in Spencer, Iowa, two medical clinics, and other comprehensive health care programs. The majority of the Hospital's patients are from Spencer and northwest Iowa.

### Reporting Entity

For financial reporting purposes, the Hospital has included all funds, organizations, institutions, agencies, departments, and offices that are not legally separate. In accordance with Government Accounting Standards Board (GASB), the Hospital has considered all potential component units for which it is financially accountable, and other organizations for which the nature and significance of their relationship with the Hospital are such that exclusion would cause the Hospital's financial statements to be misleading or incomplete. The GASB has set forth criteria to be considered in determining financial accountability. These criteria include appointing a voting majority of an organization's governing body, and (1) the ability of the Hospital to impose its will on that organization or (2) the potential for the organization to provide specific benefits to, or impose specific financial burdens on the Hospital. These criteria also include organizations that are fiscally dependent on the Hospital.

Abben Cancer Center, LLC (Abben) is a legally separate wholly-owned limited liability company and is considered a discretely presented component unit of the Hospital. Abben was organized on June 20, 1996 and shall continue in existence until June 20, 2026 unless dissolved sooner in accordance with its operating agreement. Its financial statements are separately presented on pages 15 through 17. Abben is a medical clinic that operates a cancer treatment center on the Hospital's campus.

Avera Home Medical Equipment of Spencer Hospital, LLC (HME) is a legally separate limited liability company that the Hospital and Avera Home Medical Equipment, LLC formed in 2010. Each member owns 50% of HME and has an equal number of voting managers on its management committee. Due to the Hospital's lack of control over HME, its investment is accounted for by using the equity method and it is not considered a component unit of the Hospital. HME was a development stage company in 2010, began operations in 2011, and has been established to sell home medical equipment from a retail location located in Spencer.

### **Measurement Focus and Basis of Accounting**

Basis of accounting refers to when revenues and expenses are recognized in the accounts and reported in the financial statements. Basis of accounting relates to the timing of the measurements made, regardless of the measurement focus applied.

The accompanying financial statements have been prepared on the accrual basis of accounting in conformity with U.S. generally accepted accounting principles. Revenues are recognized when earned and expenses are recorded when the liability is incurred.

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

### Measurement Focus and Basis of Accounting - Continued

In reporting its financial activity, the Hospital applies all applicable GASB pronouncements as well as the relevant pronouncements of the Financial Accounting Standards Board (FASB) issued on or before November 30, 1989, unless those pronouncements conflict with or contradict GASB pronouncements.

#### **Use of Estimates**

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### Cash and Cash Equivalents

For purposes of the statements of cash flows, savings accounts, money market mutual funds, and all other highly liquid investments (including restricted assets) with original maturities of three months or less are considered cash equivalents.

#### **Noncurrent Cash and Investments**

Noncurrent cash and investments include funds restricted by donors for capital improvements or specific operations of the Hospital; permanently endowed funds; and assets set aside by the Board of Trustees for identified purposes and over which the Board retains control and may, at its discretion, subsequently use for other purposes.

Permanent endowments require that the principal be retained in perpetuity.

### **Patient Receivables**

Patient receivables are shown at the amount expected to be collected. Patient receivables where a third-party payor is responsible for paying the amount are carried at a net amount determined by the original charge for the service provided, less an estimate made for contractual adjustments or discounts provided to third-party payors.

Patient receivables due from the patients are carried at the original charge for the service provided less amounts covered by third-party payors and less an estimated allowance for doubtful accounts based on a review of all outstanding amounts on a monthly basis. Management determines the allowance for doubtful accounts and the contractual adjustment by applying historical write off and contractual adjustment percentages to the outstanding balances as segregated by major third-party payor classifications.

### Inventory

Inventory is valued at the lower of average cost or market using the first-in, first-out method and consists primarily of patient supplies, including pharmaceuticals and operating supplies.

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

### **Capital Assets**

Capital assets are stated at average cost less accumulated depreciation. Depreciation is provided using the straight-line method over the estimated useful lives of the assets in accordance with the guidelines set forth by the American Hospital Association. Lives for the buildings and land improvements are five to fifty years while the equipment lives range from three to twenty years.

Management reviews its long-lived assets used in operations for impairment when there is an event or change in circumstances that indicates an impairment in value. If such impairment is present, an impairment loss is recognized based on the excess of the carrying amount of the asset over its fair value. Impairment losses of \$16,000 and \$4,456 were recognized on potential construction projects that were abandoned in 2012 and 2011, respectively.

### Investments

Investments in common stocks, mutual funds, and real estate held in the permanently endowed funds are carried at fair value based on quoted market prices or third-party appraisals. Investments in real estate not in the endowed funds are carried at cost. Donated investments are reported at fair value at the date of receipt, which is then treated as cost.

The Hospital's investments in Abben and HME are accounted for by using the equity method, where the Hospital records its share of the earnings or losses. The investment in Abben was approximately \$256,000 greater than the underlying member's equity at June 30, 2012 and 2011. The difference is attributable to goodwill which is tested for impairment on an annual basis.

### **Deferred Finance Costs**

Deferred finance costs are stated at cost and are amortized over the term of the revenue bonds using the straight-line method.

### **Net Assets**

Net assets are presented in the following categories:

*Invested in capital assets, net of related debt* consist of capital assets, net of accumulated depreciation and reduced by the outstanding balances of long-term debt that are attributable to the acquisition, construction, or improvement of those assets.

Restricted by donor - nonexpendable net assets consist of the principal portion of permanent endowments.

Restricted by donor - expendable net assets consist of noncapital net assets that must be used for a particular purpose as specified by the donors.

Unrestricted net assets consist of net assets not meeting the definition of the three preceding categories. Unrestricted net assets often have constraints on resources imposed by management or the board of trustees which can be removed or modified.

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

### Net Assets - Continued

When both restricted and unrestricted net assets are available for use, generally it is the Hospital's policy to use restricted net assets first.

### **Operating Revenues and Expenses**

The Hospital and Abben's statements of revenues, expenses and changes in net assets distinguish between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services. Nonexchange revenues, including taxes, grants, and contributions received for purposes other than capital asset acquisition, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services.

### **Net Patient Service Revenue**

Net patient service revenue and clinic revenue are reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

### Interest and Investment Income

Interest and investment income are recorded as nonoperating revenue. Investment income includes dividends, net rental income, and gains and losses, both realized and unrealized, on equity securities and real estate in the permanently endowed funds.

### **Interest Expense**

Interest costs incurred on borrowed funds during the construction period of capital assets were capitalized as a component of the constructed assets. All of the borrowings from revenue bonds have been used to fund construction projects and equipment purchases.

### **Charity Care and Community Benefits**

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. The Hospital maintains records to identify and monitor the level of charity it provides. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as net patient service revenue. The amount of charges forgone, based on established rates, for 2012 and 2011, were \$644,528 and \$532,979, respectively. The costs of charity care are estimated to be \$252,000 and \$216,000 for 2012 and 2011, respectively. Costs are estimated by using the most recent cost to charge ratio available at the end of the year.

The Hospital provides many services that are operated at a loss for the benefit of the communities it serves. Many of these programs are offered at no cost; a few are offered for a minimal service fee. Services offered for the benefit of these communities include: emergency services coverage at community events, wellness screenings, job shadowing/internships, various health education classes, public safety awareness programs, support groups, and providing the use of facilities to community groups.

### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

### **Charity Care and Community Benefits** - Continued

In addition, many routine services are provided by the Hospital at a loss. These include: Ambulance Services, Cardiac/Pulmonary Rehabilitation, Agrisafe - Certified Farm Safety, Home Health and Public Health Programs, Inpatient Mental Health, Best Care for Better Babies, Women's Health, Rehabilitation Services (Physical and Occupational Therapy), Family Practice Clinics in Milford and Sioux Rapids, and Diabetic Education.

### **Income Taxes**

The Hospital is exempt from federal and state income taxes on related income pursuant to Section 501(a) of the Internal Revenue Code of 1986.

Abben is not a tax paying entity for federal and state income tax purposes and all of its net income is attributable to the Hospital and is therefore tax exempt. As a limited liability company, Abben is subject to accounting standards that apply to pass-through entities, which prescribe a comprehensive model for how a company measures, recognizes, presents, and discloses in its financial statements uncertain tax positions. Based upon management's evaluation of the current facts and circumstances, no income tax liability or expense has been recorded in its financial statements.

### Reclassification

In July 2011, FASB amended the accounting standards for the financial statement presentation of bad debt expense in the statement of revenues, expenses, and changes in net assets for health care entities. The new standards require the presentation of bad debt expense to be an adjustment to net patient revenue instead of being an operating expense. The Hospital elected to adopt this new standard early; and while the new standard had no impact on operating income or the change in net assets, the 2011 statements and disclosures were reclassified to conform to the 2012 presentation.

### Management's Review

In preparation of the financial statements, management has evaluated subsequent events through October 3, 2012, which is the date the financial statements were available to be issued.

### 2. CASH AND INVESTMENTS

The Hospital's deposits at June 30, 2012 and 2011 were entirely covered by FDIC or SIPC insurance or by the State Sinking Fund in accordance with Chapter 12C of the Code of Iowa. This Chapter provides for additional assessments against members of the pool to insure there will be no loss of public funds. At June 30, 2012 and 2011, Abben had uninsured bank balances of \$113,241 and \$79,372, respectively.

### 2. CASH AND INVESTMENTS - Continued

The Hospital is authorized by statute to invest public funds in obligations of the United States government, its agencies and instrumentalities; certificates of deposit or other evidences of deposit at federally insured depository institutions approved by the Board of Trustees of the Hospital; prime eligible bankers acceptances; certain high rated commercial paper; perfected repurchase agreements; certain registered open-end management investment companies (mutual funds); certain joint investment trusts; investments in common stocks; and warrants or improvement certificates of a drainage district.

The Hospital's cash and investments at June 30, 2012 and 2011 are as follows:

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	<u>2012</u>	<u>2011</u>
Cash and cash equivalents  Certificate of deposit	\$32,003,168 125,000	\$26,453,427
Common stocks and mutual fundsReal estate and other	6,888,058 1,384,555	6,958,453 <u>1,085,364</u>
TOTAL CASH AND INVESTMENTS	<u>\$40,400,781</u>	<u>\$34,497,244</u>
The cash and investments shown above are included in the follows:	Hospital's balaı	nce sheets as
	<u>2012</u>	<u>2011</u>
Current assets:  Cash and cash equivalents  Investments - common stocks and mutual funds  Subtotal	\$26,784,059 6,888,058 33,672,117	\$21,328,567 6,958,453 28,287,020
Noncurrent cash and investments:  Cash and cash equivalents  Certificate of deposit	5,219,109 125,000	5,124,860
Real estateSubtotal	1,384,555 6,728,664	1,085,364 6,210,224
TOTAL CASH AND INVESTMENTS	\$40,400,781	\$34,497,244
Common stock and mutual fund investments and real esta endowed fund are carried at fair value. The net unrealized g 30, 2012 and 2011 are as follows:		
50, 2012 and 2011 are as follows.	<u>2012</u>	<u>2011</u>
Common stocks	\$ 1,136,613 	\$ 1,595,413 <u>824,894</u>
Net unrealized gain	\$ 2,245,507	\$ 2,420,307

### 2. CASH AND INVESTMENTS - Continued

Investment income consisted of the following:

investment interne condicted of the following.		<u>2012</u>	<u>2011</u>
Unrealized gains (losses) on common stocks and mutual funds  Unrealized gains on real estate  Realized gains on common stocks and mutual funds  Dividend income  Rental income - net of expenses	\$	(458,800) 284,000 118,681 62,931 77,465	\$ 1,289,694 246,400 288,713 41,105 37,451
TOTAL INVESTMENT INCOME - NET	\$_	84,277	\$ 1,903,363

In accordance with its investment policy, the Hospital manages its exposure to declines in fair values by owning investments with various maturities. These investments include fixed money market accounts, certificates of deposit, and equity securities. The Hospital's philosophy for investing funds allows for fluctuation in yearly returns without putting the Hospital's ability to meet current expenditures at risk.

The Hospital's investment policy also limits the investment of operating funds (funds expected to be expended in the current budget year or within 15 months of receipt) to instruments that mature within 397 days. Funds not identified as operating funds may be invested in investments with maturities longer than 397 days, but the maturities shall be consistent with the needs and use of the Hospital.

### 3. NET PATIENT SERVICE REVENUE

As a provider of health care services, the Hospital and Abben have agreements with third-party payors that provide for payment of services at amounts different from established rates. The basis for payment varies by payor and includes prospectively determined rates per discharge, discounts from established charges, and retroactively determined cost-based rates. Approximately 92 percent of the Hospital's gross patient charges determined at established rates for the years ended June 30, 2012 and 2011 resulted from patients covered by these third-party reimbursement programs. Significant changes have been made and may be made in certain of these programs which could have a material adverse impact on the financial condition of the Hospital and Abben in future years.

### 3. NET PATIENT SERVICE REVENUE - Continued

The following summarizes the differences between the Hospital's gross patient service revenue determined at established rates and net patient service revenue:

	<u>2012</u>	<u>2011</u>
Gross patient service revenue - at established rates . Adjustments:	<u>\$139,388,404</u>	\$133,293,147
Medicare program	42,761,871	41,659,130
Medicaid program	8,124,723	7,656,806
Blue Cross/Wellmark	16,990,825	15,440,836
Other payors	4,560,171	3,980,606
Charity care	644,528	532,979
Bad debts	2,603,752	2,587,455
Total Adjustments	75,685,870	71,857,812
Net Patient Service Revenue	\$ 63,702,534	<u>\$ 61,435,335</u>

### 4. PATIENT RECEIVABLES

The Hospital grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at June 30, 2012 and 2011 was:

	<u>2012</u>	<u>2011</u>
Medicare Medicaid Blue Cross/Wellmark Other payors Clinics Total patient receivables Less allowance for doubtful accounts Less allowance for contractual adjustments Total allowances	\$ 7,068,407 1,744,866 3,900,333 5,909,123 119,161 18,741,890 2,346,000 8,983,200 11,329,200	\$ 6,192,380 1,086,204 4,033,136 5,527,053 145,980 16,984,753 2,143,000 7,583,700 9,726,700
Patient Receivables	\$ 7,412,690	\$ 7,258,053

### 5. CAPITAL ASSETS

A summary of the Hospital's changes in capital assets for 2012 and 2011 is as follows:

	Year Ended June 30, 2012				
				Disposals	
	Beginning <u>Balance</u>	<u>Additions</u>	Impairment <u>Losses</u>	and <u>Transfers - Net</u>	Ending <u>Balance</u>
Capital assets not being depreciated			_		
Land	\$ 2,011,733	\$ 86,219	\$ -	\$ 332,649	\$ 2,430,601
Construction in progress	<u>153,843</u>	<u>2,227,460</u>	<u>(16,000</u> )	<u>(1,905,547</u> )	<u>459,756</u>
Total capital assets not	2 465 576	2,313,679	(16,000)	(1,572,898)	2,890,357
being depreciated	2,165,576	2,313,079	(10,000)	(1,572,090)	
Other capital assets:					
Land improvements	1,537,022	-	-	3,500	1,540,522
Buildings	47,522,573	220,433	-	307,112	48,050,118
Fixed equipment	8,551,517	25,030	-	34,784	8,611,331
Major moveable equipment	40,462,432	<u>1,453,163</u>		<u>988,119</u>	42,903,714
Total other capital assets	<u>98,073,544</u>	<u>1,698,626</u>	_	<u>1,333,515</u>	<u>101,105,685</u>
Total capital assets	100,239,120	4,012,305	(16,000)	(239,383)	103,996,042
Less accumulated depreciation for:					
Land improvements	875,125	89,394	_	_	964,519
Buildings	16,023,624	1,620,740	-	_	17,644,364
Fixed equipment	6,637,118	307,851	-	-	6,944,969
Major moveable equipment	28,711,269	3,809,358	-	(227,254)	32,293,373
Total accumulated					
depreciation	52,247,136	5,827,343	<u> </u>	<u>(227,254</u> )	57,847,225
CAPITAL ASSETS - NET	\$ 47,991,984	<u>\$(1,815,038</u> )	<u>\$ (16,000</u> )	<u>\$ (12,129)</u>	<u>\$ 46,148,817</u>
		Year	Ended June 30,		
		Year l		Disposals	
	Beginning		Impairment	Disposals and	Ending
	<u>Balance</u>	Year l		Disposals	Ending Balance
Capital assets not being depreciated	<u>Balance</u>	Additions	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u>	<u>Balance</u>
Land	Balance \$ 2,011,733	Additions \$ -	Impairment	Disposals and <u>Transfers - Net</u> \$ -	<u>Balance</u> \$ 2,011,733
Land Construction in progress	<u>Balance</u>	Additions	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u>	<u>Balance</u>
Land  Construction in progress  Total capital assets not	Balance \$ 2,011,733 1,372,630	Additions \$ - 1,337,248	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u> \$ - (2,556,035)	Balance \$ 2,011,733 153,843
Land Construction in progress	Balance \$ 2,011,733	Additions \$ -	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u> \$ -	<u>Balance</u> \$ 2,011,733
Land	Balance \$ 2,011,733	Additions \$ - 1,337,248	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u> \$ - (2,556,035)	Balance \$ 2,011,733 153,843
Land Construction in progress  Total capital assets not being depreciated	Balance  \$ 2,011,733	Additions \$ - 1,337,248	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u> \$ - (2,556,035)	Balance \$ 2,011,733
Land	Balance  \$ 2,011,733	Additions \$ - 1,337,248	Impairment Losses  \$	Disposals and <u>Transfers - Net</u> \$ - (2,556,035) (2,556,035)	Balance \$ 2,011,733 153,843 2,165,576
Land	Balance  \$ 2,011,733	Additions \$ - 1,337,248 - 1,337,248 - 76,813 9,584	Impairment <u>Losses</u>	Disposals and <u>Transfers - Net</u> \$ - <u>(2.556,035)</u> <u>(2,556,035)</u> 4,027 1,027,841 86,967	\$ 2,011,733
Land	Balance  \$ 2,011,733	Additions  \$ - 1,337,248  1,337,248  76,813 9,584 1,477,193	Impairment Losses  \$	Disposals and Transfers - Net  \$ - (2.556,035)  (2.556,035)  4,027 1,027,841 86,967 1,350,479	\$ 2,011,733
Land	Balance  \$ 2,011,733	Additions \$ - 1,337,248 - 1,337,248 - 76,813 9,584	Impairment Losses  \$	Disposals and <u>Transfers - Net</u> \$ - <u>(2.556,035)</u> <u>(2,556,035)</u> 4,027 1,027,841 86,967	\$ 2,011,733
Land	Balance  \$ 2,011,733	Additions  \$	Impairment Losses  \$	Disposals and Transfers - Net  \$ - (2.556,035)  (2.556,035)  4,027 1,027,841 86,967 1,350,479	\$ 2,011,733
Land Construction in progress Total capital assets not being depreciated  Other capital assets: Land improvements Buildings Fixed equipment Major moveable equipment Total other capital assets  Total capital assets	\$ 2,011,733 1,372,630 3,384,363 1,532,995 46,417,919 8,459,422 37,634,760 94,045,096	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	\$ 2,011,733
Land	Balance  \$ 2,011,733	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	\$ 2,011,733
Land Construction in progress Total capital assets not being depreciated  Other capital assets: Land improvements Buildings Fixed equipment Major moveable equipment Total other capital assets  Total capital assets  Less accumulated depreciation for: Land improvements	Balance  \$ 2,011,733	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	\$ 2,011,733
Land	Balance \$ 2,011,733	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	\$ 2,011,733
Land Construction in progress Total capital assets not being depreciated  Other capital assets: Land improvements Buildings Fixed equipment Major moveable equipment Total other capital assets  Total capital assets  Less accumulated depreciation for: Land improvements	Balance  \$ 2,011,733	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	875,125 1,011,733 153,843 2,165,576 1,537,022 47,522,573 8,551,517 40,462,432 98,073,544
Land Construction in progress Total capital assets not being depreciated  Other capital assets: Land improvements Buildings Fixed equipment Major moveable equipment Total other capital assets  Total capital assets  Less accumulated depreciation for: Land improvements Buildings Fixed equipment	Balance \$ 2,011,733	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	\$ 2,011,733
Land Construction in progress Total capital assets not being depreciated  Other capital assets: Land improvements Buildings Fixed equipment Major moveable equipment Total other capital assets  Total capital assets  Less accumulated depreciation for: Land improvements Buildings Fixed equipment Major moveable equipment Major moveable equipment	Balance  \$ 2,011,733	Additions  \$	Impairment   Losses	Disposals and Transfers - Net  \$ - (2.556,035)	\$ 2,011,733

### 6. LONG-TERM DEBT

The Hospital's long-term debt activity as of and for the years ended June 30, 2012 and 2011 is as follows:

2011 le de fellewe.	June 30, <u>2011</u>	<u>Payments</u>	June 30, <u>2012</u>	Due Within One Year
Hospital Revenue Bonds Series 2008 A (A) Hospital Revenue Bonds Series 2008 B (B) 2007 Hospital Revenue Bonds (C)	\$ 6,213,434 5,019,008 823,636	\$ (715,773) (561,908) (562,072)	\$ 5,497,661 4,457,100 261,564	\$ 748,226 592,329 261,564
	<u>\$12,056,078</u>	<u>\$(1,839,753</u> )	<u>\$10,216,325</u>	<u>\$1,602,119</u>
	June 30, <u>2010</u>	<u>Payments</u>	June 30, <u>2011</u>	Due Within <u>One Year</u>
Hospital Revenue Bonds Series 2008 A (A) Hospital Revenue Bonds Series 2008 B (B) 2007 Hospital Revenue Bonds (C)		Payments  \$ (686,024)     (534,284)     (540,907)		

- (A) The Series 2008A bonds are payable in monthly principal and interest payments of \$81,049 at a fixed interest rate of 4.29% through December 2018.
- (B) The Series 2008B bonds are payable in monthly principal and interest payments of \$67,410 at a fixed interest rate of 5.10% through December 2018.
- (C) The 2007 revenue bonds are payable in monthly principal and interest payments of \$48,668 through January 2013 at a fixed interest rate of 3.8%.

The maturities and payment components of the Hospital's long-term debt are as follows:

Year Ending <u>June 30,</u>	<u>Principal</u>	Interest	<u>Total</u>
2013	\$ 1,602,119	\$ 443,690	\$ 2,045,809
2014	1,405,121	376,389	1,781,510
2015	1,472,821	308,688	1,781,509
2016	1,543,192	238,318	1,781,510
2017	1,618,215	163,296	1,781,511
2018 - 2019	2,574,857	97,427	2,672,284
TOTAL	<u>\$10,216,325</u>	<u>\$1,627,808</u>	<u>\$11,844,133</u>

The revenue bonds were issued under the provisions of Chapter 384.24A of the Code of lowa and as such the principal and interest payments are payable solely from the revenues of the Hospital and do not constitute a liability or obligation of the City of Spencer. The bond proceeds have been used to finance building additions, building improvements, and purchase medical equipment.

### 6. LONG-TERM DEBT - Continued

The Hospital has pledged future revenues, net of defined expenses, to repay the bonds. The net pledged revenues, as defined in the bond document, and the principal and interest requirements for the Hospital's long-term debt are as follows:

	<u>2012</u>	<u>2011</u>
Net pledged revenues	\$ 9,970,980	<u>\$ 9,675,638</u>
Principal and interest requirements	<u>\$ 2,073,516</u>	<u>\$ 2,365,523</u>

### 7. RETIREMENT PLAN

The Hospital contributes to the Iowa Public Employees Retirement System (IPERS) which is a cost-sharing multiple-employer defined benefit pension plan administered by the State of Iowa. IPERS provides retirement and death benefits which are established by state statute to plan members and beneficiaries. IPERS issues a publicly available financial report that includes financial statements and required supplementary information. The report may be obtained by writing to IPERS, PO Box 9117, Des Moines, Iowa 50306-9117.

Plan members are required to contribute 5.38% of their annual covered salary and the Hospital is required to contribute 8.07% of annual covered payroll for 2012. For 2011 and 2010, the member contribution rates were 4.50% and 4.30%, and the Hospital contribution rates were 6.95% and 6.65%, respectively. Contribution requirements are established by state statute. The Hospital's contributions to IPERS for 2012, 2011, and 2010 were \$1,759,365, \$1,489,503, and \$1,404,054, respectively, equal to the required contributions for each year.

### 8. OTHER POST EMPLOYMENT BENEFITS

In accordance with state law, the Hospital operates a single-employer retiree benefit plan which provides medical/prescription drug and dental benefits for retirees and their spouses. There are 461 active and 9 retired members in the plan. Participants must be age 55 or older at retirement.

The medical/prescription drug and dental benefit plans are self-insured and are administered by a third party. Retirees under age 65 pay 100% of the full active employee premium rates. This results in an implicit subsidy and an Other Post Employment Benefit (OPEB) liability. The contribution requirements of the plan members are established and may be amended by the Hospital. The Hospital currently finances the retiree benefit plan on a pay-as-you-go basis.

### 8. OTHER POST EMPLOYMENT BENEFITS - Continued

The Hospital's annual OPEB cost is calculated based on the annual required contribution, (ARC), of the Hospital, an amount actuarially determined in accordance with GASB Statement No. 45. The ARC represents a level of funding that, if paid on an ongoing basis, is projected to cover normal cost each year and amortize any unfunded actuarial liabilities over a period not to exceed 30 years. The following table shows the components of the Hospital's annual OPEB cost for June 30, 2012, the amount actually contributed to the plan and changes in the Hospital's net OPEB obligation:

Annual required contribution, ARC	\$ 86,397
Interest on net OPEB obligation	7,076
Adjustment to annual required contribution	<u>(9,653</u> )
Annual OPEB cost	83,820
(Contributions made) claims paid	<u>(50,623</u> )
Increase in net OPEB obligation	33,197
Net OPEB obligation - beginning of year	<u> 157,241</u>
Net OPEB obligation - end of year	<u>\$190,438</u>

For calculation of the net OPEB obligation, the actuary has set the transition date as July 1, 2009. The end of year net OPEB obligation was calculated by the actuary as the cumulative difference between the actuarially determined funding requirements and the actual contributions for the year ended June 30, 2012.

For the year ended June 30, 2012, the Hospital contributed \$50,623 to the plan. The Hospital's annual OPEB cost, the percentage of annual OPEB cost contributed to the plan, and the net OPEB obligation as of June 30, 2012 are summarized as follows:

Fiscal Year Ended June 30,	Annual <u>OPEB Cost</u>	Percentage of Annual OPEB <u>Cost Contributed</u>	Net OPEB Obligation
2010	\$ 79,783	15%	\$ 67,467
2011	78,677	(14)%	157,241
2012	83,820	60%	190,438

As of July 1, 2011, the most recent actuarial valuation date for the period July 1, 2011 through June 30, 2012, the actuarial accrued liability was \$764,554 with no actuarial value of assets, resulting in an unfunded actuarial accrued liability, (UAAL), of \$764,554. The covered payroll (annual payroll of active employees covered by the plan) was approximately \$18,840,000, and the ratio of the UAAL to the covered payroll was 4.1%. As of June 30, 2012 and 2011, there were no trust fund assets.

### 8. OTHER POSTEMPLOYMENT BENEFITS - Continued

Actuarial valuations of an ongoing plan involve estimates of the value of reported amounts and assumptions about the probability of occurrence of events far into the future. Examples include assumptions about future employment, mortality, and the healthcare cost trend. Actuarially determined amounts are subject to continual revision as actual results are compared with past expectations and new estimates are made about the future. Following is a Schedule Funding Progress for the Plan:

Actuarial Valuation <u>Date</u>	Actuarial Value of <u>Assets</u>	Actuarial Accrued Liability (AAL)	Unfunded AAL <u>(UAAL)</u>	Funded <u>Ratio</u>	Covered <u>Payroll</u>	UAAL as a Percentage of Covered <u>Payroll</u>
July 1, 2009	<u>\$</u>	\$662,439	<u>\$662,439</u>	<u>0%</u>	<u>\$17,710,000</u>	<u>3.7%</u>
July 1, 2010	<u>\$</u>	<u>\$662,439</u>	<u>\$662,439</u>	<u>0%</u>	<u>\$17,710,000</u>	<u>3.7%</u>
July 1, 2011	<u>\$</u>	<u>\$764,554</u>	<u>\$764,554</u>	<u>0%</u>	\$18,840,000	<u>4.1%</u>

Projections of benefits for financial reporting purposes are based on the plan as understood by the employer and the plan members and include the types of benefits provided at the time of each valuation and the historical pattern of sharing of benefit costs between the employer and plan member to that point. The actuarial methods and assumptions used include techniques that are designed to reduce the effects of short-term volatility in actuarial accrued liabilities and the actuarial value of assets, consistent with the long-term perspective of the calculations.

As of the July 1, 2011 actuarial valuation date, the projected unit credit actuarial cost method was used. The actuarial assumptions include a 4.5% discount rate based on the Hospital's funding policy. The projected annual medical trend rate is 8%. The ultimate medical trend rate is 5%. The Hospital's trend rate is reduced 1% each year until reaching the 5% ultimate trend rate.

Mortality rates are from the RP2000 Group Annuity Mortality Table, applied on a gender-specific basis. Annual retirement and termination probabilities were developed from the Actuary's Pension Handbook.

Projected claim costs of the medical plan are approximately \$1,238 per month for retirees. The salary increase rate was assumed to be 4% per year. The UAAL is being amortized as a level dollar amount on an open basis over a period of 30 years.

### 9. RISK MANAGEMENT

The Hospital and Abben are exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illness; natural disasters; and employee health and accident benefits. Certain of these risks are covered by commercial insurance purchased from independent third parties. Settled claims from these risks have not exceeded commercial insurance coverage for the past three years.

### 9. RISK MANAGEMENT - Continued

The Hospital is self-insured for the following types of risk exposures:

### **Health Benefits**

The Hospital has established an Employee Health Insurance Plan that self insures health benefits. Self-insurance is in effect up to a specific stop loss amount of \$70,000 per individual and an aggregate stop loss amount of approximately \$5.2 million. Coverage from private insurance companies is maintained for losses in excess of the aggregate stop loss amount up to a maximum of \$1,000,000 per policy period. Claims handling procedures are performed by an independent claims administrator. Losses are accrued based upon the Hospital's estimates of the aggregate liability for claims incurred using certain assumptions followed in the insurance industry and based on the Hospital's experience. The amounts of unpaid claims included in the financial statements were \$416,029 and \$523,615 at June 30, 2012 and 2011, respectively, and are included in other current liabilities.

### **Unemployment Compensation**

The Hospital is also self-insured for unemployment compensation claims. Unemployment is charged quarterly as the state assesses the Hospital based upon actual claims paid.

### 10. RELATED PARTY TRANSACTIONS

### **Spencer Regional Healthcare Foundation**

The Spencer Regional Healthcare Foundation (Foundation) is a tax-exempt non-profit organization to solicit contributions for qualifying health care facilities within a 20-mile radius of Spencer, Iowa. The Foundation is governed by an independent board, but it does include a minority number of members from the Hospital board; accordingly, the Hospital and the Foundation are considered related parties. The Foundation made charitable contributions to the Hospital in the amount of \$17,786 and \$36,740 during 2012 and 2011, respectively.

### Abben Cancer Center, LLC

The Hospital has entered into various agreements with Abben whereby the Hospital will provide management and operating services and lease a building and related equipment to Abben. The agreements include defined methodologies to calculate the rates and are cancelable by either party 90 days prior to the anniversary date of the agreements. The following summarizes the transactions with Abben:

S .	<u>2012</u>	<u>2011</u>
Personnel service fees for benefits and expenses	<u>\$ 180,483</u>	<u>\$ 174,725</u>
Leased employees' salaries	<u>\$ 387,842</u>	\$ 376,888
Building and equipment rental income	<u>\$ 564,981</u>	<u>\$ 561,378</u>

At June 30, 2012 and 2011, the Hospital's receivable from Abben was \$133,797 and \$135,618, respectively, which is included in other receivables. The balance consists of the above fees and cash advances for direct operating expenses less cash repayments.

### 10. RELATED PARTY TRANSACTIONS - Continued

### **Board of Trustees**

The Hospital has depository accounts at local financial institutions who are affiliated with two Hospital trustees. The Hospital earned interest income of \$16,005 and \$32,133 in 2012 and 2011, respectively, on accounts held at these financial institutions.

The Hospital purchased supplies of \$723 and \$1,485 from a company owned in part by a Hospital trustee in 2012 and 2011, respectively.

The Hospital incurred farm management fees of \$6,048 and \$6,004 from a company owned in part by a Hospital trustee in 2012 and 2011, respectively.

### 11. OPERATING LEASES

The Hospital has entered into noncancelable operating lease agreements involving three medical clinics. The Hospital has exercised its renewal options which have extended the leases to various dates through fiscal year 2019. The rental expense for 2012 and 2011 was \$436,244 and \$426,647, respectively.

The following is a schedule of future minimum rental payments to be made:

Year Ending June 30,	<u>Amount</u>
2013	\$ 436,247
2014	137,022
2015	77,100
2016	77,100
2017	77,100
2018 - 2019	89,651
TOTAL	<u>\$ 894,220</u>

The Hospital subleases one of the above clinics and leases office space in its medical office building to unrelated parties under noncancelable operating lease agreements. The original terms of the leases expired at various dates through 2017, but they do have optional renewal clauses (which have been exercised) and annual rental increase clauses to recover increased expenses. The rental income under the agreements for 2012 and 2011 was \$547,828 and \$484,623, respectively, and is included in investment income.

### 11. OPERATING LEASES - Continued

The following is a schedule of future minimum rental payments to be received including the subleases:

Year Ending June 30,	<u>Amount</u>
2013 2014 2015 2016 2017	\$ 320,278 86,950 86,950 77,465 
TOTAL	<u>\$ 620,654</u>

The cost and accumulated depreciation of the leased property including the property leased to Abben are as follows:

	<u>2012</u>	<u>2011</u>
Medical office buildings	\$ 3,735,921 253,537	\$ 3,508,486 252,290
Abben building	2,543,163 4,001,597 10,534,218 4,518,765	2,543,163 4,001,597 10,305,536 3,907,972
Net property and equipment	\$ 6,015,453	\$ 6,397,564

### 12. COMMITMENTS

The Hospital has committed to construct or purchase various capital improvement projects totaling approximately \$8,600,000, which are expected to be funded using current cash reserves.

The Hospital has also entered into other various agreements that have committed it to future payments. The commitments include binding purchase orders, supplemental payments to physicians' groups, equipment maintenance agreements, service agreements, and physician recruiting agreements. As of June 30, 2012, the total amount expected to be paid on these commitments is approximately \$2,500,000 with the majority to be paid in 2013.

### SPENCER MUNICIPAL HOSPITAL REQUIRED SUPPLEMENTARY INFORMATION FOR THE YEAR ENDED JUNE 30, 2012

### SPENCER MUNICIPAL HOSPITAL BUDGETARY COMPARISON SCHEDULE AND RELATED NOTES FOR THE YEAR ENDED JUNE 30, 2012

	Bı	udgeted Amounts		_	
	Original	GAAP <u>Adjustments</u>	GAAP <u>Budget</u>	<u>Actual</u>	Final to Actual <u>Variance</u>
Operating revenues Operating expenditures Operating income Other nonoperating	\$71,368,100 <u>67,819,300</u> 3,548,800	\$ (2,914,300) (3,452,500) 538,200	\$68,453,800 64,366,800 4,087,000	\$67,720,123 60,890,843 6,829,280	\$ (733,677) <u>3,475,957</u> 2,742,280
changes in net assets	<u>1,051,200</u>	(538,200)	513,000	(217,149)	<u>(730,149</u> )
Changes in Net Assets	\$ 4,600,000	\$	<u>\$ 4,600,000</u>	\$ 6,612,131	<u>\$2,012,131</u>

#### **NOTES**

This budgetary comparison is presented as Required Supplementary Information in accordance with Governmental Accounting Standards Board Statement No. 41 for governments with significant budgetary perspective differences.

The Hospital Board of Trustees annually prepares and adopts a budget designating the amount necessary for the improvement and maintenance of the Hospital following required public notice and hearing in accordance with Chapters 24 and 392.6 of the Code of Iowa. The Board of Trustees certifies the approved budget to the appropriate city officials. The budget may be amended during the year utilizing similar statutorily prescribed procedures. Formal and legal budgetary control is based on total expenditures. The Hospital classifies interest and bad debt expenses on a budget basis different from generally accepted accounting principles (GAAP). Interest expense is classified as an operating expense for the budget but is classified as a nonoperating expense for GAAP, and bad debt expense is classified as an operating expense for the budget but is classified in operating revenues for GAAP.

For 2012, the Hospital's expenditures did not exceed the amount budgeted.

#### SPENCER MUNICIPAL HOSPITAL SUPPLEMENTAL INFORMATION FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

SPENCER MUNICIPAL HOSPITAL GROSS PATIENT SERVICE REVENUE FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

2011 <u>Total</u>	6,540,089 3,243,116 427,606 1,245,007 578,100	12,033,918	187,370	1,330,858	29, 133, 733 3,444,268 7,419,773	17,853,767 2,020,667	64,707,497	651,415	6,531,666 436,689	1,469,899 23,566	5,459,609	2,140,703 382,166
	↔											
<u>Total</u>	6,701,833 3,561,276 420,275 1,235,918 416,745	12,336,047	105,513	1,488,160	3,172,548 7,783,832	19,175,721 2,121,461	68,321,871	653,513	6,867,839 354,908	1,430,818 10,917	5,807,475	281,110 281,110
	↔											
Home Health	 Ф	1	1 1	1 1	1 1 1	928	928	1 1	1 1	1 1	1	1 1
2012 Skilled Care	\$ - - - 416.745	416,745	, , , , , , , , , , , , , , , , , , ,	14, 12,	2,050	16,617	51,722	31,681	53,364 403	2,573	13,924	2,400
Outpatient	\$ 634,432 - 3,272	637,704	105,513 1,770,341	536,452	2,090,077 2,405,530 6,216,862	5,234,413 2,121,271	42,858,647	46,106 1,493.177	4,306,095 126,204	976,934 10,189	4,837,411	281,110
Inpatient	\$ 6,067,401 3,561,276 420,275 1,232,646	11,281,598	3,149	959,434 951,708 7,600,973	764,968 766,968 1.566,970	13,923,763	25,410,574	575,726	2,508,380 228,301	451,311 728	956,140	100,748
	Medical and surgery	TOTAL DAILY PATIENT SERVICES	OTHER NURSING SERVICES: Partial hospitalization	Delivery and labor rooms	Operating rooms	Medical supplies	TOTAL OTHER NURSING SERVICES	OTHER PROFESSIONAL SERVICES: Respiratory therapyAmbulance	LaboratoryBlood bank	Electrocardiology	Radiology	Stereotactic biopsy

See Independent Auditors' Report.

SPENCER MUNICIPAL HOSPITAL GROSS PATIENT SERVICE REVENUE - Continued FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

			2012				2011	
OTHER PROFESSIONAL SERVICES-	Inpatient	Outpatient	Skilled Care	Home Health		<u>Total</u>	Total	
Continued:				€	e	7 284 613	A 010	70
C1 scan	808,808	0,421,190	0,0,0	ا <del>٥</del>	<del>0</del>	7,204,013		S :
MRI	174,277	2,369,510	1	1		2,543,787	2,913,224	24
Nuclear medicine	42,572	1,053,797	1	3		1,096,369	1,074,440	40
Radiation oncology	14,964		20,931	1		35,895	123,716	16
Pharmacy	3,177,228	11,039,603	162,132	1		14,378,963	14,083,063	63
Therapy pool		213,610	1	•		213,610	199,597	161
Anesthesiology	670,360	1,305,710	638	1		1,976,708	1,853,633	33
Physical therapy	. 482,735	1,404,249	55,311	46,331		1,988,626	1,747,092	92
Speech therapy	17,456	298,960	4,365	264		321,045	362,426	.26
Enterostomal service	32,401	258,763	9,533	1		300,697	315,825	25
Occupational therapy	320,503	418,305	33,622	9,982		782,412	704,295	95
Pulmonary function testing	2,265	157,339		ı		159,604	148,857	157
Sleep study		628,167	ı	1		629,767	662,503	03
Pulmonary rehab		26,859	ı	1		26,859	31,229	29
Cardiac rehab		290,178	ı	1		290,178	266,631	31
Dialysis - Spencer	1,783	1,890,402	1	1		1,892,185	1,688,099	66
Dialysis - Spirit Lake		2,616,244	ı	1		2,616,244	2,184,399	66
Home health:								
Registered nurse care	1	1	ī	611,170		611,170	685,976	9/
Aides care	1	ī	3	543,208		543,208	570,550	20
County assistance	1	1	•	100,000		100,000	100,000	00
Other care		1	1	1,824,450		1,824,450	1,394,267	29;
TOTAL OTHER PROFESSIONAL								
SERVICES	10,704,387	44,496,242	394,452	3,135,405		58,730,486	56,551,732	35
TOTAL GROSS PATIENT SERVICE REVENUE	\$ 47,396,559	\$ 87,992,593	\$ 862,919	\$ 3,136,333	φ	139,388,404	\$ 133,293,147	47

See Independent Auditors' Report.

## SPENCER MUNICIPAL HOSPITAL NET PATIENT SERVICE REVENUE AND OTHER OPERATING REVENUES FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	2012	2011
GROSS PATIENT SERVICE REVENUE (Schedule 1)	\$ 139,388,404	\$ 133,293,147
ADJUSTMENTS TO PATIENT SERVICE REVENUE:		
Medicare program	42,761,871	41,659,130
Medicaid program	8,124,723	7,656,806
Blue Cross / Wellmark	16,990,825	15,440,836
Other payors	4,560,171	3,980,606
Charity care	644,528	532,979
Bad debts	2,603,752	2,587,455
TOTAL ADJUSTMENTS TO PATIENT	 2,003,732	 2,007,400
SERVICE REVENUE	75 695 970	71 957 919
SERVICE REVENUE	 75,685,870	 71,857,812
NET PATIENT SERVICE REVENUE	\$ 63,702,534	\$ 61,435,335
OTHER OPERATING REVENUES:		
Abben fees:		
Personnel services	\$ 180,483	\$ 174,725
Building and equipment rental	564,981	561,378
Ag health and safety clinic	74,776	44,881
Athletic enhancement	89,998	87,814
Auxiliary income	20,288	21,529
Billing fee revenue	,	16,582
Cafeteria sales	338,912	322,312
Diagnostic imaging storage	25,204	19,458
Earnings (loss) of home medical equipment company	4,486	(65,177)
Education programs	115,919	93,844
Employee health	5,626	5,828
Immunizations	53,117	57,613
Laboratory client billing	46,715	15,901
Lifeline	-	86,093
Medical record transcripts	20,926	24,828
Miscellaneous	60,115	164,193
Outreach services:	00,	,
Enterostomal therapy	81,304	104,530
Speech therapy	37,160	47,392
Occupational therapy	41,107	53,613
Physical therapy	132,740	157,054
Planet heart and stroke screening	66,795	47,450
Purchase discounts	15,902	9,563
Salary reimbursements:	10,002	0,000
Sports medicine	38,215	5,618
Other	104,360	95,897
Steam sold	3,335	3,072
Technology consulting	13,350	36,000
recritiology consulting	 13,330	30,000
TOTAL OTHER OPERATING REVENUES	\$ 2,135,814	\$ 2,191,991

See Independent Auditors' Report.

SALARIES, PROFESSIONAL SERVICES, AND SUPPLIES AND OTHER EXPENSES FOR THE YEARS ENDED JUNE 30, 2012 AND 2011 SPENCER MUNICIPAL HOSPITAL

ı	Salaries	တ္ခ	Professional Services	al Services	Supplies and Other Expenses	ther Expense	SS
	2012	2011	2012	2011	2012	2011	
Clinical resources	\$ 361,555	\$ 331,862	ı Ө	₽	\$ 674	\$	527
Medical and surgery	1,991,703	1,983,165	18,287	67,688	170,579	173,965	92
Obstetrics	586,976	559,127	1	770	45,474	48,266	99
Mental health	954,068	880,905	34,945	12,204	24,491	23,179	79
Intensive care	488,461	488,507	85,825	85,318	26,751	29,024	24
Intravenous therapy	ı	ı	1	ı	37,367	50,884	84
Operating room	1,120,100	1,047,073	567,825	517,678	1,110,761	832,795	95
Post anesthesia care unit	299,312	323,970	2	82,587	98,614	131,000	8
Emergency service	838,171	763,263	1,435,647	1,372,544	71,784	69,117	17
Central sterilization	108,806	119,235	1,956	121,467	197,286	184,138	38
Service aide	35,725	36,258	•	ı	1		1
Same day surgery	965,707	891,613	652	105,555	78,736	56,840	64
Home health	863,928	938,942	28,322	6,494	58,376	65,362	29
Hospice	184,172	156,259	124,235	109,052	19,676	18,137	37
Enterostomal service	111,238	121,330	1	I	21,046	22,399	66
Dialysis - Spencer	381,331	321,658	54,895	52,148	111,724	114,508	80
Dialysis - Spirit Lake	382,400	346,220	105,309	94,976	225,032	213,054	54
Partial hospitalization	32,129	33,390	280	80	806	2,359	29
Medical oncology	338,700	309,324	172,484	204,600	29,560	22,947	47
Respiratory therapy	272,978	251,154	4,033	19,500	22,196	30,690	060
Laboratory	681,112	702,365	204,484	216,093	380,397	431,020	20
Blood bank	1	ı	1	1	259,618	293,968	89
Electrocardiology	41,284	75,440	74,732	73,101	265	2	200

See Independent Auditors' Report.

SALARIES, PROFESSIONAL SERVICES, AND SUPPLIES AND OTHER EXPENSES - Continued FOR THE YEARS ENDED JUNE 30, 2012 AND 2011 SPENCER MUNICIPAL HOSPITAL

I	Salaries	Se	Profe	essional	Professional Services	Supplies and Other Expenses	d Other	Expenses
	2012	2011	2012		2011	2012		2011
Radiology	\$ 563,781	\$ 512,832	\$ 62	62,529	\$ 160	\$ 392,107	\$	362,395
Ultrasound	157,372	153,166	2	5,079	1,123	25,889	•	23,389
Stereotactic biopsy	1	1		ı	95,555		•	152
MRI	63,080	69,063		1	1	166,988	~	174,086
Athletic enhancement	61,340	73,437		180	1,125	8,656	"	3,803
Nuclear medicine	96,639	96,651		,	1	206,393	~	218,130
Pharmacy	993,680	976,807	119	119,334	100,210	70,367		65,749
Anesthesiology	54,116	60,865		100	20,010	211,257		205,256
Physical therapy	647,555	649,026		360	176	37,093	~	41,616
Ambulance	536,919	507,412		∞	161	84,928	~	68,845
Social services	86,467	80,982			1	52	01	332
Cardiac rehabilitation	122,148	117,297			1	9,292	01	6,994
Medical records	572,732	566,179	96	96,506	100,073	37,699	•	42,109
CT scan	193,133	191,152	26	97,354	74,315	268,902	<b>~</b> !	101,145
Occupational therapy	263,984	261,756	33	33,402	19	18,519	•	17,412
Infection control	65,268	64,077			1	1,269	•	991
Speech therapy	121,749	122,345		47	ı	7,052	01	6,508
AG health and safety clinic	33,734	32,091		92	75	33,887	_	33,071
Sleep studies	37,696	79,366	104	104,541	36,315	7,001		15,908
Sports medicine	17,558	16,603	382	382,800	360,021	81,758	m	65,497
Lifeline	ı	7,005		1	37,464			2,724

See Independent Auditors' Report.

SPENCER MUNICIPAL HOSPITAL SALARIES, PROFESSIONAL SERVICES, AND SUPPLIES AND OTHER EXPENSES - Continued FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	Sala	Salaries	Professional Services	al Services	Supplies and C	Supplies and Other Expenses
	2012	2011	2012	2011	2012	2011
Therapy pool	ı ج	₽	₽	8	\$ 5,051	\$ 3,084
Plant.	506,655	511,174	•	3,258	283,152	314,586
Utilities	ı	ı	•	1	774,478	785,202
Housekeeping	584,872	541,854	159,588	159,653	102,666	97,365
Laundry	22,080	79,393	188,598	53,902	64,290	68,955
Nutrition services	730,296	672,365	234,805	250,998	603,581	528,264
Valet	62,679	65,957	1	ı	4,793	4,227
General accounting	319,078	297,424	7,744	7,430	17,737	15,501
Human resources	244,936	236,719	1,319	1,475	152,290	69,315
Patient accounts	724,766	704,427	269,692	225,149	80,846	72,401
Information systems	528,806	498,787	110,153	31,389	698,536	724,186
Administration	1,147,835	1,109,642	204,896	339,876	919,551	917,261
Safety	38,326	ı	•	1	176	1
Materials management	158,824	141,184	2,000	2,000	55,360	42,057
Communications	1	ī	7,927	1,484	88,566	96,142
Central supply	76,836	74,605	•	1	5,672,216	5,480,400
Printing and duplicating	14,209	15,189	1	1	139,494	146,390
Insurance	1	1	ı	1	237,863	231,776
Staff development	210,836	198,965	54,389	53,225	27,875	29,713
Medical care evaluation	396,006	380,920	175,559	179,466	17,438	18,272
PET/CT scan	ı	•	141,975	151,875	1,935	2,111
Women's health	33,406	29,210	1	ı	4,205	3,569
SHAPE	80,767	124,138	1	1	694	365
TOTAL	\$ 21,613,020	\$ 21,001,125	\$ 5,374,896	\$ 5,429,837	\$ 14,613,217	\$ 13,921,633

See Independent Auditors' Report.

### SPENCER MUNICIPAL HOSPITAL PATIENT RECEIVABLES AND ALLOWANCE FOR DOUBTFUL ACCOUNTS FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

#### PATIENT RECEIVABLES ANALYSIS OF AGING:

	2012		20	11
	Amount	Percent	Amount	Percent
DAYS SINCE DISCHARGE:	<u>Amount</u>	To Total	<u>Amount</u>	<u>To Total</u>
00 - 30		43.20%	\$ 7,289,475	42.92%
31 - 60		11.15%	1,796,277	10.59%
61 - 90 91 - 120		5.82% 4.60%	1,065,705 784,157	6.27% 4.62%
Over 120		12.41%	1,841,684	10.84%
Clinic receivables		0.64%	145,980	0.86%
TOTAL RECEIVABLES BILLED	14,582,714	77.81%	12,923,278	76.09%
In Hospital	4,159,176	22.19%	4,061,475	23.91%
TOTAL PATIENT RECEIVABLES	18,741,890	100.00%	16,984,753	100.00%
Allowance for doubtful accounts	. (2,346,000)		(2,143,000)	
Allowance for contractual adjustments	(8,934,000)		(7,527,000)	
Clinic allowance for contractual adjustments	. (49,200)		(56,700)	
TOTAL ADJUSTMENTS	(11,329,200)		(9,726,700)	
PATIENT RECEIVABLES - NET	\$ 7,412,690		\$ 7,258,053	
TATIENT NECEIVABLES - NET	Ψ 7,412,030		Ψ 1,230,033	
ALLOWANCE FOR DOUBTFUL ACCOUNTS:			<u>2012</u>	<u>2011</u>
BALANCE - BEGINNING OF YEAR			\$ 2,143,000	\$ 2,055,000
Provision charged to expense			. 2,603,752	2,587,455
Accounts written off			. (3,179,580)	(3,240,456)
Recoveries of accounts previously written of	f		. 778,828	741,001
BALANCE - END OF YEAR			\$ 2,346,000	\$ 2,143,000
DALANCE - LIND OF TEAN			Ψ 2,340,000	Ψ 2, 143,000

#### SPENCER MUNICIPAL HOSPITAL INVENTORIES AND PREPAID EXPENSES FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

	<u>2012</u>	<u>2011</u>
INVENTORIES:		
Store room	\$ 377,661	\$ 522,777
Nutrition services		22,943
Laboratory	87,845	75,329
Laundry	-	4,694
Pharmacy	727,571	642,532
Radiology	11,995	14,071
Surgery	1,575,723	1,224,383
Other departments		47,903
TOTALS	\$ 2,852,509	\$2,554,632
PREPAID EXPENSES:		
Service contracts and other	\$ 719,407	\$ 648,293
Association dues	38,361	37,728
Insurance	37,358	32,345
	<u> </u>	
TOTALS	\$ 795,126	\$ 718,366

#### SPENCER MUNICIPAL HOSPITAL INVESTMENT TRANSACTIONS FOR THE YEAR ENDED JUNE 30, 2012

	Balances Beginning <u>of Year</u>	Additions During the <u>Year</u>	Sales During the <u>Year</u>	Realized & Unrealized Gains (Losses)	Balances End <u>of Year</u>
Certificate of deposit Common stocks and	\$ -	\$ 125,000	\$ -	\$ -	\$ 125,000
mutual funds	6,958,453	3,489,218	(3,219,494)	(340,119)	6,888,058
Real estate and other	1,085,364	15,191		284,000	1,384,555
TOTAL	\$ 8,043,817	\$ 3,629,409	\$ (3,219,494)	\$ (56,119)	\$ 8,397,613

## SPENCER MUNICIPAL HOSPITAL OTHER INFORMATION FOR THE YEARS ENDED JUNE 30, 2012 AND 2011

# SPENCER MUNICIPAL HOSPITAL COMPARATIVE STATISTICS FOR THE YEARS ENDED JUNE 30, 2012 AND 2011 UNAUDITED

A dmissions:	<u>2012</u>	<u>2011</u>
Admissions:  Medical/surgery, obstetrics & intensive care	2,147	2,378
Mental health unit	597	2,570 560
Swing bed and inn care	106	173
Newborns		274
-		
TOTAL	3,115	3,385
Discharges:		
Medical/surgery, obstetrics & intensive care	2,169	2,349
Mental health unit	605	566
Swing bed and inn care	117	185
Newborns	268	276
TOTAL	3,159	3,376
Patient days:		
Medical/surgery, obstetrics & intensive care	7,623	8,052
Mental health unit	3,634	3,471
Swing bed and inn care	884	1,251
Newborns	588_	611
TOTAL	12,729	13,385
Average length of stay (days):		
Medical/surgery, obstetrics & intensive care	3.55	3.39
Mental health unit	6.09	6.20
Swing bed and inn care	8.34	7.23
Newborns	2.22	2.23
Average number of patients per day:	00.00	00.00
Medical/surgery, obstetrics & intensive care	20.88	22.06
Mental health unit	9.96	9.51
Swing bed and inn care	2.42	3.43
Newborns	1.61	1.67
Outpatient visits	120 682	121 702
Outpatient visits	120,682	121,793
Licensed beds at end of year	99	99

### WINTHER, STAVE & Co., LLP Certified Public Accountants

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INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF BASIC FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Trustees of Spencer Municipal Hospital

We have audited the accompanying basic financial statements of Spencer Municipal Hospital (Hospital) as of and for the years ended June 30, 2012 and 2011, and have issued our report thereon dated October 3, 2012. We conducted our audits in accordance with U.S. generally accepted auditing standards and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

#### Internal Control Over Financial Reporting

The management of the Hospital is responsible for establishing and maintaining effective internal control over financial reporting. In planning and performing our audit, we considered the Hospital's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing our opinion on the effectiveness of the Hospital's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Hospital's internal control over financial reporting.

A deficiency in internal control exists when the design or operation of the control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

#### Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Hospital's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Comments involving statutory and other legal matters about the Hospital's operations for the year ended June 30, 2012 are based exclusively on knowledge obtained from procedures performed during our audit of the government financial statements of the Hospital. Since our audit was based on tests and samples, not all transactions that might have had an impact on the comments were necessarily audited. The comments involving statutory and other legal matters are not intended to constitute legal interpretations of those statutes.

This report, a public record by law, is intended solely for the information and use of the officials, employees, and constituents of Spencer Municipal Hospital and other parties to whom Spencer Municipal Hospital may report and is not intended to be and should not be used by anyone other than those specified parties.

We would like to acknowledge the many courtesies and assistance extended to us by personnel of Spencer Municipal Hospital during the course of our audit. Should you have any questions concerning any of the above matters, we shall be pleased to discuss them with you at your convenience.

Winther, Stave & Co., LLP

October 3, 2012

#### SPENCER MUNICIPAL HOSPITAL SCHEDULE OF FINDINGS FOR THE YEAR ENDED JUNE 30, 2012

#### Part I: Findings Related to the Financial Statements

None

#### Part II: Other Findings Related to Required Statutory Reporting

#### II-A-12 Certified Budget

For the year ended June 30, 2012, the Hospital's expenditures did not exceed the amount budgeted.

#### II-B-12 Questionable Expenditures

No expenditures that we believe may not meet the requirements of public purpose as defined in an Attorney General's opinion dated April 25, 1979 were noted.

#### II-C-12 Travel Expense

No expenditures of Hospital money for travel expenses of spouses of Hospital officials and/or employees were noted.

#### **II-D-12** Business Transactions

Business transactions between the Hospital and Hospital officials or employees are detailed as follows:

Business Connection	Transaction Description	<u>Amount</u>
Neal Conover, Board member Chairman of Northwest Bank	Interest income from Northwest Bank	\$11,012
Kris Van Berkum, Board member Co-owner JCL Solutions	Purchase of cleaning supplies	723
John Cotton, Board member Co-owner Cotton Grave Farm Management & Realty	Farm management fees	6,048
Co-owner Community State Bank	Interest income from Community State Bank	4,993

The transactions do not appear to represent a conflict of interest since the transactions were entered into through competitive bidding in accordance with Chapter 362.5(4); additionally with regards to the banking transactions, the bank has been approved by the board of trustees in accordance with Chapter 362.5(2) of the Code of Iowa.

#### SPENCER MUNICIPAL HOSPITAL SCHEDULE OF FINDINGS - Continued FOR THE YEAR ENDED JUNE 30, 2012

#### Part II: Other Findings Related to Required Statutory Reporting - Continued

#### II-E-12 Board Minutes

No transactions were found that we believe should have been approved in Board minutes but were not. The Board minutes were examined and appeared to give a condensed, accurate account of business transacted by the Board.

#### II-F-12 Deposits and Investments

No instances of non-compliance with the deposit and investment provisions of Chapter 12B and Chapter 12C of the Code of Iowa and the Hospital's investment policy were noted.